

MAY 08 2008

PTO/SB/83 (01-08)

Approved for use through 12/31/2008. OMB 0651-0035

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/581,233
Filing Date	08/03/2006
First Named Inventor	Michel Abittan
Art Unit	3877
Examiner Name	David C. Reese
Attorney Docket Number	ABAL5001

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application and

- ☐ all the attorneys/agents of record
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 029889

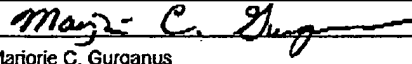
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number

The reasons for this request are: Please see attached addendum

CORRESPONDENCE ADDRESS

- 1 ☐ The correspondence address is NOT affected by this withdrawal
- 2 ☒ Change the correspondence address and direct all future correspondence to:

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<input checked="" type="checkbox"/> Firm or Individual Name	Abittan Abrasives & Colour Me & Drop-A-Diamond & Pear of Diamond and Faceted Rocks 100%Diamond NV		
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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CENTRAL FAX CENTER****MAY 08 2008****ADDENDUM TO REQUEST FOR WITHDRAWAL AS ATTORNEY OR
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Client has instructed us to discontinue work for him on this application. Client has been provided the most recently issued Office Action. Client has previously been provided with copies of all other filings relating to U.S. Patent Application No. 10/581,233. We are serving the client with a copy of this request for withdrawal. Furthermore, the client has failed to pay invoices for an unreasonable period of time over six consecutive months.

For additional reference, the correspondence address for the client's general counsel and foreign patent counsel are set out below:

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